

**Duval County Courthouse and the Jacksonville Sheriff's Office
APPLICATION FOR COURT REPORTER ACCESS CARD**

Name of Court Reporter: _____

Name of Company: _____

Home Address: _____

Work Address: _____

Email Address: _____

Business Phone and Cell Numbers: _____

Business Fax Number: _____

Date of Birth: _____

Driver License Number: _____

Notary Number: _____

DECLARATION

I hereby declare the information provided herein is true and correct. I understand that I must submit to a background check which may cause the denial of my application, and that submitted applications become a public record. If any of the information in this application changes, I will report it to the Jacksonville Sheriff's Office promptly, and I understand that a failure to do so promptly may subject my access card to being revoked.

Signature

Date

Please submit this application by email to Court Counsel Julie Taylor at jktaylor@coj.net, or by fax to (904)255-1082, or by U.S. Mail to:

Julie Taylor
Duval County Courthouse
501 West Adams Street
Suite #7212
Jacksonville, Florida 32202

Following a background check and the approval of an application, a \$10.00 fee must be paid to the Jacksonville Sheriff's Office at the Police Memorial Building to complete the application process.

For internal use only:

Background check complete.

Signature

Date